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ABSTRACT Activities involved in coordinating community services for handicapped children in the Austin Early Childhood Special Education (AECSE) Program are reviewed. Needs are explained to be identified through records review and appraisal of the health screening programs. Establishing priorities and developing cooperation between parents, staff, and the community are seen to be important steps in meeting the student's needs. Other aspects of the community coordination program are linking AECSE to community resources, helping to improve the community's service system for children, and disseminating information about the AECSE Program.
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The Austin Early Childhood
Special Education Program

COORDINATION OF COMMUNITY SERVICES

Outreach Project
✓ Austin Early Childhood Special Education
Austin Independent School District

Fall, 1976

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Overview

One of the major goals of the Austin Early Childhood Special Education (AECSE) Program is to demonstrate how an early childhood program in a public school can serve as a base from which to develop a system to meet the comprehensive health and social services needs of handicapped children. This goal stems from the belief that in order to achieve maximum effectiveness, early intervention attempts must treat the child as a whole, including his "community service" needs. Community service needs are physical, social, and/or emotional needs of children that are most aptly met by an agency, program or individual in the community rather than in the school.

Because the child spends such a large part of his day in school, the school is an ideal location for coordinating and meeting the comprehensive service needs of the child. It is not expected that the public school can or should provide every type of service needed by the child. Rather, the coordinator of community services uses the school as a base from which to identify comprehensive needs and coordinate activities with existing programs such as the Public Health Department, the Department of Public Welfare, local speech and hearing clinics, neurological evaluation clinics, and the local Mental Health Mental Retardation Center.

Goals

The coordinator of community services has five main goals:

1. To identify the comprehensive community service needs of all children enrolled in the program.
2. To meet the identified needs of the children using the school as a base from which to coordinate services.
3. To link the program (staff, parents, children) to the resources of the local community.
4. To improve the community's general service delivery system for handicapped children.
5. To provide the community with information about the program and its community services coordination aspect.

Activities

Identifying Comprehensive Community Service Needs

Three main types of activities are involved in identifying the community service needs of children in the program. The first involves reviewing the child's main folder and interviewing his parents in order to set up his Community Services Record (see Appendix). Other activities involve formal health screening and identifying further needs as they arise during the year.

Establishing Community Services Records

Most of the information on the Community Services Record is obtained by the coordinator of community services in a parent interview held at school on the child's first day. Before talking with the parent, the coordinator views the child's special education folder, making note of services mentioned there as well as any needs that may have been mentioned in the registration materials. If the record is not obtained from a parent interview, the coordinator may complete it by phoning the parent, making a home visit, or contacting professionals that work with the family.

The record lists agencies, doctors, and other professionals that have served the child and may have information of use to the school. It divides information into several categories: general medical and pediatric care and evaluations from specialists.

therapy (speech, occupational, physical), day care and education programs, counseling and psychological evaluations, financial assistance, and other. The record lists only information which may be relevant to the school's work with the child, and thus does not necessarily include every agency or professional that has ever served the child.

The record is filed in the child's central folder and is used by AECSE staff in requesting reports, documenting past testing and evaluation, and determining current evaluation needs. The coordinator updates the child's record when he leaves the program and the updated record goes to the child's next educational placement.

Health Screening Program

Identification of needs continues with the health screening program. Each year the coordinator works with AECSE staff and the community to conduct hearing, vision, and dental screening at school for all children enrolled in the program. The coordinator records results of these screenings on the Health Screening Reports form (see Appendix).

Each fall the coordinator works with the staff and community members to make arrangements and set dates for each screening. The hearing screening is done by an audiologist who works according to a schedule planned by the speech pathologists.

The coordinator also schedules dental and vision screening.

She initiated an arrangement with the Austin Independent School District (AISD) Vision Screening Technicians wherein they conduct yearly screening for AECSE students. The second year of the program the coordinator worked closely with the Vision Screening Technicians to select a suitable vision screening instrument for use with young handicapped children. Prior to the screening the coordinator meets with the vision technicians to set dates, provides teachers with information on how to prepare their children for screening, locates facilities for screening, and arranges a schedule. During the screening, the coordinator assists by bringing classes for screening, identifying children, and recording results.

Each year the coordinator arranges dental screening. She locates a dentist who is willing to donate time for screening, provides him with information on the children and program, and arranges a schedule for screening. On the screening day, she takes the dentist to each class, identifies children who are being screened, and records results.

Continued Identification of Needs

In addition to needs identified in the files and in the health screenings, community service needs are also identified throughout the year by staff, parents, and other agencies working with the

family. The coordinator maintains regular contact with these sources to receive information on needs and to offer assistance if necessary. To maintain this communication, the coordinator attends classroom staffings on children, receives reports and requests from various staff members, and maintains personal contact with parents and other agencies serving a family.

Meeting Identified Community Service Needs

The coordinator assists staff, parents, and the community in meeting the identified community service needs of the children. Specific needs are identified in a number of ways: by the dental, vision, or hearing screening; by an AECSE teacher or therapist; by the child's parent; or by others serving a child such as a doctor or social worker. Many different needs are identified: need for ear, eye, or dental exam and care; Big Buddy Services; or neurological evaluation. Coordinator activities to meet needs include 1) preliminary activities, 2) providing assistance to parents, staff, and the community, 3) recording and reporting of activities, and 4) forwarding information.

Preliminary Activities

Before the coordinator can effectively assist parents, staff, and the community in meeting identified needs, certain preliminary activities must occur. The first of these involves establishing

assistance procedures and assigning responsibilities developed and agreed on by the AECSE staff. Through agreement with the staff, the coordinator assumes responsibility for following-up on most needs that are identified in the hearing, vision, and dental screening programs. As additional community service needs are identified, they are discussed in staffings and the coordinator notified of the necessity for action on her part.

A second preliminary activity is to establish priorities that will guide the coordinator in deciding the order in which needs should be met. The assistance priority is determined by the type of need that is identified. Children's needs in order of priority for action by the coordinator are:

1. Children with identified health/physical needs and in need of immediate care - infection, dental problems, etc.
2. Children needing evaluations and establishment of regular care - neurological, orthopedic, etc.
3. Children needing other services - companion, recreation, therapy outside schools.
4. Children with no identified needs. The coordinator meets regularly with teachers and others to discuss possible needs.

This priority order may be "overruled" at times by a specific request from AECSE staff, parents, or the community for action by the coordinator. These specific requests are usually acted upon the day they are received.

Providing Assistance

Following these preliminary activities, the coordinator interacts with 3 groups - parents, AECSE staff, and the community - to assist in meeting the community service needs that are identified. The coordinator notifies the staff of a need, meets with them concerning the need, or reports to them on efforts to meet the need. She interacts with the parents, both directly, by providing assistance and services to families, and indirectly, by providing information or arranging assistance from other agencies. She interacts with members of the community by informing agency personnel of client needs, requesting community services, coordinating multi-agency services or providing feedback to agencies on client progress.

Recording and Reporting

All attempts to meet a child's needs are recorded in the coordinator's file on that child. In addition, the coordinator reports progress made in meeting these needs to those in the program and community who are involved. Reports to the staff are usually made via informal sessions in the classroom and written memos. Reports to parents are often made on the phone, personal visits and written memos are also used. Phone contacts and written memos are the means typically used to report to agencies and programs.

Forwarding Information

When a child leaves the program, the coordinator forwards relevant information concerning his community service needs to those persons who will be working with him in his new educational setting. The coordinator places in the child's central folder 1) a summary of health screening results and follow-up, and 2) a summary of any relevant information, such as needs yet to be met, upcoming appointments that the family may need assistance with, sources of financial assistance the child has received, past evaluations, medical care, etc.

A copy of the coordinator's report is also forwarded to the visiting teacher or counselor assigned to the child's next school placement, so continued assistance may be provided to meet his comprehensive needs.

Linking AECSE to the Resources of the Community

The third major goal of the coordinator is to link the AECSE staff, parents, and children to the resources of the community. Many resources which can be of benefit to parents and staff exist in the local community. It is often difficult, however, for parents and staff to devote the time necessary to become aware of and use these resources. The coordinator works to link these persons to resources, thereby increasing services that are provided to children

and staff, increasing full utilization of community resources, improving coordination and cooperation among those serving handicapped children, and increasing community participation in the program. To achieve this, the coordinator engages in activities in two areas: 1) locating, compiling, and making available information on community services and 2) involving persons from the community in the AECSE Program.

Locating, Compiling, and Making Information Available

Locating, compiling, and making available information on community services is a continuing activity of the coordinator. She collects information on the broad range of services that might be used by AECSE parents and staff in meeting the comprehensive needs of the children. Activities related to the collection of information include direct contacts with agencies for written and verbal information, collecting directories that list services for handicapped preschool children, and joining organizations and attending meetings of associations that maintain and distribute information on services (such as the local Association for Retarded Citizens, or Association for Children with Learning Disabilities). Information collected is maintained in files according to the type of service available.

The coordinator disseminates appropriate information to parents,

staff, and the community on both an individual and a group basis. On an individual basis, the coordinator identifies parents who are in need of a specific service and helps them get in touch with this service. The Big Buddy program, genetic counseling, and applying for social security disability payments for a child are examples of types of services on which information has been supplied. The coordinator also tells teachers about services that may be of interest, such as the Texas State Library for the Blind and Physically Handicapped. Information is distributed on a group basis through memos and the parent newsletter.

The coordinator also works on special information projects. For example, each spring she compiles information on summertime activities that will be available for young children, including educational and recreational services. This information is put in newsletter form and distributed to parents.

Another major dissemination project resulted in a directory of services for handicapped children. The coordinator headed a special project with AECSE parents and community agency personnel in which detailed information was obtained on all agencies serving handicapped children in the local community. This information was compiled in a directory of services for handicapped children which lists services under the following categories:

- | | |
|---|---|
| 1) adoption, foster homes | 13) non-residential education, training, vocational services |
| 2) after school, weekend, day care | 14) occupational, physical therapy and motor development |
| 3) associations (for handicapped persons, parents, professionals) | 15) public and professional education and training |
| 4) counseling and social services | 16) recreation, friends, advocates, socialization, and volunteer services |
| 5) diet and nutrition | 17) residential education, training, vocational services |
| 6) equipment, supplies, and materials | 18) speech/language therapy |
| 7) financial assistance | 19) transportation |
| 8) genetic counseling | |
| 9) health, medical, physical care and evaluations | |
| 10) information and referral | |
| 11) legal services | |
| 12) religious services | |

Four hundred fifty copies of this directory were distributed free of charge to AECSE parents, all agencies listed in the directory, school and other professional personnel, associations and organizations concerned with handicapped children, and parents of handicapped children not in the AECSE Program.

Involving Persons from the Community in the Program

A second major task in linking the AECSE Program to community resources is to involve the community in the general AECSE Program. Individuals in the community are invaluable sources of information, expertise, and support for the staff, children, and parents. The coordinator works with individuals in the community to meet particular needs of specific children and helps to bring the support and expertise of the community to the whole AECSE Program.

The coordinator can arrange for community experts to share their knowledge with parents and staff. She contacts individuals such as dentists, pediatricians, and therapists, arranging for them to conduct informative meetings for parents and staff. She also arranges for persons in the community to serve the children directly. For example, the coordinator arranged for a volunteer to conduct weekly music activities with the children. She also establishes contact with community agencies that serve children, such as a State School Motor Development Program, a Big Buddy Program, the Parks and Recreation Department, and the Christmas Bureau.

Improving the Community's Service System for Children

The fourth major goal of the coordinator is to improve the community's general service system for handicapped children. This aspect of her work is designed to improve and plan the community's service system for all children, rather than working to meet a specific need for a particular child. Through contacts with the community in meeting needs and linking the program with resources, the coordinator is in an excellent position to establish contact with others who are concerned with improving general services for children, including handicapped children. The needs of children are best served if those employed by the service system engage in activities designed to assess, improve and distribute information about the system.

Work with Groups

To improve the service system, the coordinator works with groups and organizations and also engages in independent activities. As the first step in working with groups, the coordinator establishes and maintains contact with others in the community who are concerned with improving services for children. Such groups have included: a group concerned with services to the deaf and hard of hearing, the Austin ISD Early Childhood Advisory Committee, the local Community Services Association, the local Association for Retarded Citizens, the local Community Council, and a child care organization.

In some instances, the coordinator serves on committees whose goals involve improving services in general. She worked with a committee of the deaf services group to present a program to local pediatricians concerning services available to deaf and hard of hearing children in Austin. For one year, she served on the Austin ISD Early Childhood Advisory Committee, which was composed of representatives of various community agencies. This committee organized a phone survey of needs of young children in Austin and made recommendations to the school district regarding needs that were identified. The coordinator also served for a time on a committee sponsored by the local Association for Retarded Citizens to discuss mental retardation services.

In another activity with groups, the coordinator worked for two years with the local Community Services Association, and served as the group's secretary for one year. Through this organization she met with representatives of other social service agencies and participated in discussions of general services and existing needs.

Independent Action

The coordinator may also take independent action to improve the community's service system for handicapped children. As needs of children are identified and gaps in available services become evident, the coordinator takes action to fill these gaps. She has supplied written information to community agencies on existing needs, such as providing information on the need for dental care for children to a local social services planning agency. The coordinator may also act to expand available services, such as obtaining agreements from dentists to conduct assessments and provide low cost services, encouraging a local men's service club to expand the population served in their ear care program, and working with school health screening personnel to expand the population screened yearly to include children in AECSE.

Disseminating Information

Providing the community with information about the AECSE Program and her role as community coordinator is the fifth major goal of the

coordinator of community services. Disseminating accurate information concerning the AECSE Program is part of continuing communication and cooperation among agencies serving handicapped children. Documentation and dissemination of information concerning the community services component allows others to benefit from the AECSE experience in this lesser known area and provides them with ideas on how a school-based program can meet the comprehensive needs of the children it serves.

Program Information

The coordinator engages in various activities to disseminate information about the AECSE Program to the community. She arranges and conducts tours of the program for individuals and groups from the community. On occasion individuals from the community call and request tours; at other times the coordinator invites individuals and groups such as pediatricians or agency employees to visit the program, or arranges observation schedules for university students. Program tours conducted by the coordinator involve providing general background information on the program through a slide show, discussion, or brochure, followed by a period of classroom observation.

In addition to bringing members of the community to the program, the coordinator goes into the community to disseminate program information. Activities in this area include: mailing out and distributing program brochures, presenting the program slide show to groups,

speaking to community groups (such as a men's service club or community services association), and participating in panel discussions concerning services to children.

Documentation

In a second major activity area, the coordinator documents, evaluates, and disseminates information specifically regarding the community coordination aspect of the AECSE Program. The coordinator maintains files where her activities in each of the five main goal areas are recorded. She also maintains a file on each child which lists the needs of the child as well as her activities with parents, staff, and the community to meet these needs. She keeps records of inservices arranged, volunteers scheduled, tours conducted, presentations made, meetings attended, etc. She maintains records of hours spent working in each of the areas outlined in her job description.

The coordinator also engages in formal and informal self-evaluative efforts. In a formal evaluation, the coordinator worked with the program evaluator to design, distribute, and analyze a questionnaire to parents regarding their need for community services and their evaluation of services received from the coordinator. On a more informal level, the coordinator compiles and reports information regarding her accomplishments in the five main goal areas, such as the number of needs identified and met, number of tours,

presentations, etc.

Much coordinator time has been spent developing the coordinator of community services position; this was a necessary prelude to disseminating information on the coordinator's role. The coordinator has prepared a slide show describing her job, and at their request, has made formal presentations to several university classes and, special education teachers on the role of the coordinator of community services.

Appendix

Early Childhood Community Services Record

Name _____ Date _____ Update _____

<u>TYPE</u>	<u>AGENCY/INDIVIDUAL</u>	<u>DATE</u>	<u>COMMENTS</u>
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AUSTIN INDEPENDENT SCHOOL DISTRICT
Early Childhood Special Education

Health Screening Reports

Child's Name _____

Hearing Screening By _____ Date _____

Passed Bilaterally _____ Non-Medical Fail _____ Medical Fail _____

Comments/Follow-up _____

Dental Screening By _____ Date _____

Comments/Follow-Up _____

Vision Screening By _____ Date _____

Comments/Follow-up _____

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